

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 101586, 032	FILING DATE 7-13-06
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	1							
2		1						
3		2						
4		2						
5		0						
6		0						
7		0						
8		0						
9		1						
10		1						
11		1						
12		0						
13		0						
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47				1				
48				1				
49				1				
50				1				
TOTAL IND.	2	↓		↓		↓		
TOTAL DEP.	26	←		←		←		
TOTAL CLAIMS	28							
51				1				
52				1				
53				1				
54				1				
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100								
TOTAL IND.		↓		2	↓		↓	
TOTAL DEP.		←		28	←		←	
TOTAL CLAIMS				30				